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Attorney for Secured Creditor  
Deutsche Bank National Trust Company, as Certificate  
Trustee on behalf of Bosco Credit II Trust Series 2010-1

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF ARIZONA  
YUMA DIVISION

In Re: ) CASE NO.: 18-03403  
)  
NEMECIO CORONA ) CHAPTER 13  
)  
) **OBJECTION TO CHAPTER 13**  
Debtor. ) **PLAN**  
)  
) **341(a) Meeting of Creditors:**  
) Date: 05/11/2018  
) Time: 11:30 AM  
) Place: 1440 Desert Hills Drive, Yuma  
) Arizona

Judge: Brenda Moody Whinery

TO ALL PARTIES IN INTEREST AND TO THEIR ATTORNEYS OF RECORD:

1 Deutsche Bank National Trust Company, as Certificate Trustee on behalf of Bosco Credit  
2 II Trust Series 2010-1, its successors and/or assignees, ("Secured Creditor") in the above-  
3 entitled Bankruptcy proceeding, hereby submits the following Objections to Confirmation of  
4 the Chapter 13 Plan proposed by ("Debtor") Nemecio Corona.

5 Secured Creditor is entitled to receive payments pursuant to a Promissory Note which  
6 matures on 7/1/2020 and is secured by a Deed of Trust on the subject property commonly known  
7 as 12748 East 45<sup>th</sup> Street, Yuma Arizona 85367. As of 4/3/2018, the approximate amount in  
8 default was \$19,351.45, as will be described in a Proof of Claim; Secured Creditor files this  
9 Objection to protect its interests.

10 **ARGUMENT**

11 Under 11 U.S.C. §1325, the provisions for plan confirmation in a Chapter 13 have been  
12 set. Unless otherwise ordered, under 11 U.S.C. § 1326(a)(1), the Debtor shall commence making  
13 the payments proposed by the Plan within 30 days after the Petition is filed. The Plan must  
14 comply with all applicable provisions of 11 U.S.C. § 1325 to be confirmed. Based on the  
15 foregoing, as more fully detailed below, the Plan cannot be confirmed as proposed.

16 **A. IMPERMISSIBLY MODIFIES SECURED CREDITOR'S RIGHTS**

17 Under 11 U.S.C. §1322(b)(2), a Plan that modifies the rights of a creditor whose claim  
18 is secured only by a security interest in real property that is debtor's principal residence is  
19 impermissible. The proposed Plan modifies Secured Creditor's claim in two ways. First, while  
20 Secured Creditor's loan matures in July 2020, the plan does not provide for full payment of the  
21 loan during the plan term. In addition, the plan provides for only \$10,000 in arrears. Creditor's  
22 forthcoming Proof of Claim will show \$19,351.45 in arrears. To cure the pre-petition arrearages  
23 of \$19,351.45 over a 60 month Plan, Secured Creditor must receive a minimum payment of  
24 \$322.52 per month from the Debtor through the Plan. Debtor's Plan provides for payments in  
25 the amount of \$166.67 per month for 60 months. Therefore, the Plan is not feasible.

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# EXHIBIT “1”

**Fill in this information to identify your case:**

Debtor 1 Nemecio Corona  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the:  District of Arizona

Case number 0:18-bk-03403  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

**Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment****1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

**Employment status**

- ☒ Employed  
☐ Not employed

- ☐ Employed  
☒ Not employed

**Occupation**Technician**Employer's name**Associated Materials Inc.**Employer's address**7550 E 30 Th St

Number Street

Yuma, AZ 85365

City State ZIP Code

**How long employed there?** 2 Years

Number Street

City State ZIP Code

**Part 2: Give Details About Monthly Income**

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

**2. List monthly gross wages, salary, and commissions** (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 5,191.48

**3. Estimate and list monthly overtime pay.**

3. + \$ 0.00

**4. Calculate gross income.** Add line 2 + line 3.

4. \$ 5,191.48**For Debtor 1****For Debtor 2 or non-filing spouse**

\$ \_\_\_\_\_

+ \$ \_\_\_\_\_

\$ \_\_\_\_\_

## For Debtor 1

For Debtor 2 or  
non-filing spouse

Copy line 4 here ..... → 4.

\$ 5,191.48

\$

## 5. List all payroll deductions:

5a. Tax, Medicare, and Social Security deductions

5a. \$ 385.80

\$

5b. Mandatory contributions for retirement plans

5b. \$ 0.00

\$

5c. Voluntary contributions for retirement plans

5c. \$ 147.68

\$

5d. Required repayments of retirement fund loans

5d. \$ 0.00

\$

5e. Insurance

5e. \$ 165.36

\$

5f. Domestic support obligations

5f. \$ 0.00

\$

5g. Union dues

5g. \$ 0.00

\$

5h. Other deductions. Specify: HSA, other insurance

5h. + \$ 129.26

+ \$

\$ 0.00

\$

\$ 0.00

\$

\$ 0.00

\$

6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.

6. \$ 828.10

\$

7. Calculate total monthly take-home pay. Subtract line 6 from line 4.

7. \$ 4,363.38

\$

## 8. List all other income regularly received:

8a. Net income from rental property and from operating a business, profession, or farm

Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.

8a. \$ 0.00

\$ 0.00

8b. Interest and dividends

8b. \$ 0.00

\$ 0.00

8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive

Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.

8c. \$ 0.00

\$ 0.00

8d. Unemployment compensation

8d. \$ 0.00

\$ 0.00

8e. Social Security

8e. \$ 0.00

\$ 0.00

8f. Other government assistance that you regularly receive

Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.

Specify: \_\_\_\_\_

8f. \$ 0.00

\$ 0.00

8g. Pension or retirement income

8g. \$ 0.00

\$ 0.00

8h. Other monthly income. Specify: \_\_\_\_\_

8h. + \$ 0.00

+ \$ 0.00

9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.

9. \$ 0.00

\$ 0.00

10. Calculate monthly income. Add line 7 + line 9.

Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.

10. \$ 4,363.38

+

\$ 0.00

\$ 4,363.38

## 11. State all other regular contributions to the expenses that you list in Schedule J.

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

Specify: \_\_\_\_\_

11. + \$ 0.00

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.

Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies

12. \$ 4,363.38

Combined  
monthly income

13. Do you expect an increase or decrease within the year after you file this form?

☒ No.☐ Yes. Explain: \_\_\_\_\_

**Official Form 106I**  
**Attachment for Additional Employment Information**

Debtor / Debtor 2	Nemecio Corona
Occupation	
Name of Employer	Caravan Oasis RV LLC
Employer's Address	<div>Number Street</div> <div></div> <div></div> <div>City State ZIP Code</div>
How long employed there?	

Debtor / Debtor 2	Nemecio Corona
Occupation	
Name of Employer	L.P.G. Associates
Employer's Address	<div>Number Street</div> <div></div> <div></div> <div>City State ZIP Code</div>
How long employed there?	

Debtor / Debtor 2	
Occupation	
Name of Employer	
Employer's Address	<div>Number Street</div> <div></div> <div></div> <div>City State ZIP Code</div>
How long employed there?	

Debtor / Debtor 2	
Occupation	
Name of Employer	
Employer's Address	<div>Number Street</div> <div></div> <div></div> <div>City State ZIP Code</div>
How long employed there?	

**Fill in this information to identify your case:**

Debtor 1 Nemecio Corona  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing)   
First Name Middle Name Last Name

United States Bankruptcy Court for the: District of Arizona (State)

Case number 0:18-bk-03403  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY**Official Form 106J****Schedule J: Your Expenses**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household****1. Is this a joint case?**

- ☒ No. Go to line 2.
- ☐ Yes. **Does Debtor 2 live in a separate household?**
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

**2. Do you have dependents?**

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

- ☐ No
- ☒ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Son18

- ☐ No
- ☒ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes

**3. Do your expenses include expenses of people other than yourself and your dependents?**

- ☒ No
- ☐ Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

**4. The rental or home ownership expenses for your residence.** Include first mortgage payments and any rent for the ground or lot.

Your expenses

4. \$ 0.00**If not included in line 4:**

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 150.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00



## Your expenses

5. <b>Additional mortgage payments for your residence</b> , such as home equity loans	5.	\$	0.00
6. <b>Utilities:</b>			
6a. Electricity, heat, natural gas	6a.	\$	330.00
6b. Water, sewer, garbage collection	6b.	\$	205.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	150.00
6d. Other. Specify: _____	6d.	\$	0.00
7. <b>Food and housekeeping supplies</b>	7.	\$	645.00
8. <b>Childcare and children's education costs</b>	8.	\$	0.00
9. <b>Clothing, laundry, and dry cleaning</b>	9.	\$	265.00
10. <b>Personal care products and services</b>	10.	\$	200.00
11. <b>Medical and dental expenses</b>	11.	\$	244.00
12. <b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	680.00
13. <b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13.	\$	225.00
14. <b>Charitable contributions and religious donations</b>	14.	\$	0.00
15. <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	15a.	\$	0.00
15b. Health insurance	15b.	\$	0.00
15c. Vehicle insurance	15c.	\$	92.00
15d. Other insurance. Specify: _____	15d.	\$	0.00
16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: <u>Property</u>	16.	\$	0.00
17. <b>Installment or lease payments:</b>			
17a. Car payments for Vehicle 1	17a.	\$	0.00
17b. Car payments for Vehicle 2	17b.	\$	0.00
17c. Other. Specify: _____	17c.	\$	0.00
17d. Other. Specify: _____	17d.	\$	0.00
18. <b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18.	\$	0.00
19. <b>Other payments you make to support others who do not live with you.</b> Specify: _____	19.	\$	0.00
20. <b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>			
20a. Mortgages on other property	20a.	\$	0.00
20b. Real estate taxes	20b.	\$	0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Homeowner's association or condominium dues	20e.	\$	0.00

21. **Other.** Specify: \_\_\_\_\_

Miscellaneous \_\_\_\_\_

21. +\$ 0.00  
+\$ 220.00  
+\$ \_\_\_\_\_

22. **Calculate your monthly expenses.**

22a. Add lines 4 through 21.

22a. \$ 3,406.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.

22b. \$ \_\_\_\_\_

22c. \$ 3,406.00

23. **Calculate your monthly net income.**

23a. Copy line 12 (*your combined monthly income*) from *Schedule I*.

23a. \$ 4,363.38

23b. Copy your monthly expenses from line 22c above.

23b. -\$ 3,406.00

23c. Subtract your monthly expenses from your monthly income.  
The result is your *monthly net income*.

23c. \$ 957.38

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Explain here:

Michelle R. Ghidotti-Gonsalves, Esq. (SBN 27180)  
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Attorney for Creditor  
Deutsche Bank National Trust Company, as Certificate trustee on behalf of Bosco Credit II  
Trust Series 2010-1

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF ARIZONA – YUMA DIVISION

In Re: ) CASE NO.: 0:18-bk-03403-BMW  
)  
Nemecio Corona, ) CHAPTER 13  
)  
Debtors. ) **CERTIFICATE OF SERVICE**

**CERTIFICATE OF SERVICE**

I am employed in the County of Orange, State of California. I am over the age of  
eighteen and not a party to the within action. My business address is: 1920 Old Tustin  
Avenue, Santa Ana, CA 92705.

I am readily familiar with the business's practice for collection and processing of  
correspondence for mailing with the United States Postal Service; such correspondence would  
be deposited with the United States Postal Service the same day of deposit in the ordinary  
course of business.

On May 15, 2018 I served the following documents described as:

- Objection to Plan**

on the interested parties in this action by placing a true and correct copy thereof in a sealed envelope addressed as follows:

(Via United States Mail)

<b>Debtor</b> Nemecio Corona 12748 E 45th St Yuma, AZ 85367	<b>Chapter 13 Trustee</b> RUSSELL BROWN CHAPTER 13 TRUSTEE SUITE 800 3838 NORTH CENTRAL AVENUE PHOENIX, AZ 85012-1965
<b>Debtor's Counsel</b> JAMES R. GAUDIOSI Jim Gaudiosi, Attorney at Law PLLC 15396 N. 83rd Ave. Suite D-102 Peoria, AZ 85381	<b>Office of the U.S. Trustee</b> OFFICE OF THE U.S. TRUSTEE 230 NORTH FIRST AVENUE SUITE 204 PHOENIX, AZ 85003
JAMES ROBERT GAUDIOSI BEACON LAW FIRM 7680 UNIVERSAL BLVD SUITE 100 ORLANDO, FL 32819	

xx (By First Class Mail) At my business address, I placed such envelope for deposit with the United States Postal Service by placing them for collection and mailing on that date following ordinary business practices.

       Via Electronic Mail pursuant to the requirements of the Local Bankruptcy Rules of the Eastern District of California

xx (Federal) I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Executed on May 15, 2018 at Santa Ana, California

/s/ Krystle Miller  
Krystle Miller